

I regret to be unable to report any practicable outcome of my reports on water-supply, fire-prevention, and drainage. In December, 1879, I find in my report for that month some lengthened observations on drainage defects.

In July last there was an outbreak of typhoid fever. I reported to you during the progress of the disorder. The best arrangements for the treatment and isolation of the patients were made by Dr. Hacon, who was ably seconded by the Matron's department.

Messrs. H. J. Tancered and T. W. Maude have been appointed official visitors.

I believe I am in perfect agreement with those gentlemen if I urge on the Government the extreme value to the patients of excursions by railway. An additional carriage to a train cannot practically entail appreciable expense on the Railway Department, while the benefit alike to mind and body from such a change of air and scene is acknowledged by all experts.

The beneficial effects on the patients of light labour, and the arguments in favour of such employment on grounds of remedial and economical reasons, need not be detailed. I have, on a previous occasion (3rd December, 1879), produced statistics of value of farm-produce consumed in the asylum, as an argument for the purchase of farming land. I am not without hope Government may see its way to the acquirement of a farm upon which the patients may find employment in which they may take interest, and which may also be, if not actually remunerative, at least a relief to the expenditure on account of the asylum.

I observe a portion of the old building is now advantageously occupied as a store, under the charge of the Steward, Mr. Seager. Mr. Seager, when in England, took the opportunity of collecting considerable information on the domestic economy existing in the numerous asylums he had the means of visiting. The store department is in course of thorough reorganization, and I anticipate the best results from Mr. Seager's appointment.

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*Report by W. E. Hacon, M.R.C.S., Engl., L.R.C.P., Lond., Medical Superintendent.*

Sunnyside, Christchurch, 28th February, 1882.

I REGRET that there has been great difficulty in obtaining reliable information on admission in many instances, as many of the patients had no friends or relations to accompany them. I hold that, as a rule, it is useless to rely on information obtained from the lunatic, although it is really surprising what apparently correct answers many patients will give to questions on first admission if talked to kindly, and thus the address of relations is often obtained. Unreliable statistics are worse than useless; I have therefore classified the causes of the insanity in those cases where I could obtain no reliable information under the heading "Unknown." On inquiry among friends some will assert that a man drinks hard, and others that he is a moderate man, and even hereditary taint may be denied. I have adopted a form which I send to relations and friends, in order to obtain particulars of previous history of patients. The clause of the Lunacy Act (section 18), requiring medical practitioners to furnish statement of the treatment of the lunatic previous to reception into the asylum, is often disregarded; at the same time I owe many thanks to those medical gentlemen who have courteously sent me full particulars by letter, not only concerning private patients, but also those committed by the Magistrates.

There is a continued increase of the numbers of patients resident here, and this increase must always continue as the population increases, the readmissions also gradually increasing. For, as Dr. Thurnam, of the York Retreat, very truly says, "In round numbers, then, of ten persons attacked by insanity, five recover and five die sooner or later during the attack. Of the five who recover, not more than two remain well during the rest of their lives, the other three sustain subsequent attacks, during which at least two of them die." Supposing, then, that the proportion of discharges is yearly kept up to this average, say, of every 100 admissions yearly, fifty are discharged recovered (which is too much to expect), still accommodation must in the future be prepared for nearly 60 per cent. of all recoveries—granted that all discharged patients remain in the colony. It is not economical to provide accommodation only just sufficient for present wants, but provision should be made somewhat in excess. Here an asylum for 150 males has been built; there are already 175 males.

Care should be taken to prevent the immigration of imbeciles and persons discharged from the Home asylums. Not only should careful inquiry as to possibility of former attack of insanity or hereditary taint be made, but on arrival here all imbeciles or lunatics should be at once noticed, and steps taken to return them.

It is a great mistake to admit inebriates into a lunatic asylum, not only because it is not the proper place for them, and their idle life sets a bad example to the lunatics, but also because it may expose their children to the imputation of hereditary insanity should it ever become known that the parent has been an inmate of the asylum. To the man determined to reform, the sight of so many brains wrecked from drink should have a salutary effect, but the excuse that detention in an asylum is likely to drive the inebriate mad is always brought forward as a reason for early release. There is no doubt, therefore, that a special institution should at once be erected for inebriates at some distance from the asylum. I wish to state that all inebriates coming under my charge, in order to try and recover that moral tone, and get rid of the morbid craving for drink, are not allowed to have any stimulants, except when necessary as a medicine; and I am not in the least afraid, after my experience in both hospitals and asylums, of taking a man "right away" from the drink, but on the other hand am assured that he suffers less thereby.

A larger number of male lunatics and a smaller number of females have been admitted. Several of the male lunatics were old and enfeebled, and in bad health on admission. Some of the inebriates were in a desperate condition, and I am glad to be able to report that none died. Nine cases admitted were, in my opinion, quite unfit to be sent to a lunatic asylum as lunatics. They were—one male suffering from spinal disease and lumbar abscess (he never left his bed until he died, and was nursed in the infirmary); one female, suffering from disseminated sclerosis of the brain and cord, with